

NEIGHBOR ISLAND CANDIDATES-
SUBMIT 1 ORIGINAL AND 2 COPIES

CAMPAIGN SPENDING COMMISSION
DISCLOSURE REPORT
CANDIDATE COMMITTEE

COPY

PLEASE TYPE OR PRINT CLEARLY WITH INK (INSTRUCTIONS FOR COMPLETING THE DISCLOSURE REPORT CAN BE FOUND IN THE "GUIDEBOOK FOR CANDIDATE COMMITTEES.")

SECTION I-CANDIDATE AND CANDIDATE COMMITTEE:

(a) Candidate Name:

JOHN STEELQUIST

(b) Committee Name:

FRIENDS OF JOHN STEELQUIST

(c) Mailing Address:

841 POHUKAINA ST #8

HONOLULU HI 96813

(d) Phone (Bus)

5310050

(Res)

306 4237

Treasurer's

SECTION II-TYPE OF REPORT:

(See the Schedule of Reporting Dates to complete this section)

☐ 1st Preliminary Primary ☐ Amended ☐ First ☐ Third

☒ 2nd Preliminary Primary ☐ Short Form ¹ ☐ Second ☐ Fourth

☐ Final Primary

☐ Preliminary General

☐ Final Election Period

☐ Supplemental

REPORTING PERIOD

7/1/06 through 9/8/06

SECTION III-SUMMARY OF RECEIPTS AND DISBURSEMENTS
(Complete Section IV on the Back of this Form Before Completing This Section)

	COLUMN A TOTAL THIS PERIOD	COLUMN B ELECTION PERIOD ² TOTAL TO DATE
1. Cash on Hand at the Beginning of the Election Period ²		- 0 -
2. Cash on Hand at the Beginning of this Reporting Period.....	18 150	
3. Total Receipts (From Line 15).....	8 262	41 557
4. Subtotal (Add Lines 2 and 3 for Column A and Lines 1 and 3 for Column B).....	26 412	41 557
5. Total Disbursements (not including Unpaid Expenditures) (From Line 19).....	15 869	31 014
6. Cash on Hand at the Closing of this Reporting Period (Subtract Line 5 from Line 4)....	10 543	10 543
7. Total Loans at the Closing of this Reporting Period.....	31 250	
8. Total Unpaid Expenditures at the Closing of this Reporting Period.....	2 313	
9. Debts Owed at the Closing of this Reporting Period (Add Lines 7 and 8).....	33 563	
10. Surplus/Deficit (Subtract Line 9 from Line 6).....	< 23 020 >	

I hereby certify that the information on this report and all attached Schedules are true, correct and complete to the best of my knowledge.

Candidate Signature

Date

Treasurer Signature

Date

¹ Short Form is checked if the candidate is filing a Preliminary, Final or Supplemental Report and has aggregate contributions and aggregate expenditures for the reporting period totaling \$2,000 or less.
² An Election Period is the two-year period between general election days if a candidate is seeking nomination or election to a two-year office and the four-year period between general election days if a candidate is seeking nomination or election to a four-year office.

SECTION IV-DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS
(If Necessary, Complete Schedules A through E Before Completing This Section)

RECEIPTS	COLUMN A TOTAL THIS PERIOD	COLUMN B ELECTION PERIOD TOTAL TO DATE	
11. Contributions From:			11
(a) Individuals/Other Entities/Noncandidate Committees/Political Parties			11(a)
(i) Monetary and Non-Monetary Contributions of \$100 or Less.....	4255	4435	11(a)(i)
(ii) Monetary and Non-Monetary Contributions of More Than \$100.....	3998	5849	11(a)(ii)
(iii) Subtotal (Add Lines 11(a)(i) and 11(a)(ii)).....	8253	10284	11(a)(iii)
(b) Candidate or Candidate's Immediate Family			11(b)
(i) Monetary and Non-Monetary Contributions of \$100 or Less.....			11(b)(i)
(ii) Monetary and Non-Monetary Contributions of More Than \$100.....			11(b)(ii)
(iii) Subtotal (Add Lines 11(b)(i) and 11(b)(ii)).....			11(b)(iii)
12. Total Contributions (Add Lines 11(a)(iii) and 11(b)(iii)).....	8253	10284	12
13. Public Funds and Other Receipts.....	9	23	13
14. Loans.....		31250	14
15. Total Receipts (Add Lines 12 through 14).....	8262	41557	15
DISBURSEMENTS			
16. Expenditures.....	15869	31014	16
17. Loans Repaid or Forgiven.....			17
18. Unpaid Expenditures Paid or Forgiven.....			18
19. Subtotal Disbursements (Add Lines 16 through 18).....	15869	31014	19
20. Unpaid Expenditures.....	2313		20
21. Total Disbursements (Add Lines 19 and 20).....	18182	31014	21

CHECK ONLY ONE BOX
USE SEPARATE SCHEDULE(S) FOR EACH CATEGORY BELOW

☒ INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE
COMMITTEES/POLITICAL PARTIES

☐ CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY

STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

SCHEDULE A MONETARY AND NON-MONETARY CONTRIBUTIONS CANDIDATE COMMITTEE

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME:

John Steelquist - Friends of John Steelquist

PAGE 1 OF 3

DATE OF DEPOSIT OR RECEIPT OF NON-MONETARY CONTRIBUTION	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF DONOR	FOR AGGREGATES OF \$1,000 OR MORE NAME OF EMPLOYER	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION		
9/1/06	<input type="checkbox"/> NON-MONETARY CONTRIBUTION BRADFORD K. ISHIDA 820 11TH AVE HONOLULU, HI 96816		200.00	
9/1/06	<input type="checkbox"/> NON-MONETARY CONTRIBUTION HIN CHIU LAU 100 N. BERETANIA #210 HONOLULU, HI 96817		200.00	
9/1/06	<input type="checkbox"/> NON-MONETARY CONTRIBUTION VIDEO RIGHTS CORPORATION P.O. BOX 88127 HONOLULU, HI 96830		200.00	
9/1/06	<input type="checkbox"/> NON-MONETARY CONTRIBUTION ELIZABETH HOZAN 45-104 MAHALANI CIRCLE KANEHOHE, HI 96744		200.00	
9/1/06	<input type="checkbox"/> NON-MONETARY CONTRIBUTION LENORA H. SPRINGER 2749 TANTALUS DR. HONOLULU, HAWAII 96813		200.00	
8/31/06	<input type="checkbox"/> NON-MONETARY CONTRIBUTION HAWAII CITIZENS RIGHTS P.A.C. P.O. BOX 667 KAILUA, HI 96734		200.00	

- SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (This Page).....
- TOTAL MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (Last Page Only) (Transfer total to the applicable Line Number of the Disclosure Report - 11(a)(ii) or 11(b)(iii)).....

1 200.00

CHECK ONLY ONE BOX
USE SEPARATE SCHEDULE(S) FOR EACH CATEGORY BELOW

☒ INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE
COMMITTEES/POLITICAL PARTIES

☐ CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY

STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION

SCHEDULE A
MONETARY AND NON-MONETARY CONTRIBUTIONS
CANDIDATE COMMITTEE

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 2 OF 3

John Steelquist - Friends of John Steelquist

DATE OF DEPOSIT OR RECEIPT OF NON-MONETARY CONTRIBUTION	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF DONOR	FOR AGGREGATES OF \$1,000 OR MORE NAME OF EMPLOYER	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION		
8/31/06	<input type="checkbox"/> NON-MONETARY CONTRIBUTION DOUGLAS KILPATRICK 3880 KURLINE DR Honolulu, HI 96816		200.00	
8/31/06	<input type="checkbox"/> NON-MONETARY CONTRIBUTION SAMUEL A. COOKE 2859 MANOA ROAD Honolulu HI 96822		200.00	
8/31/06	<input type="checkbox"/> NON-MONETARY CONTRIBUTION ROGER C LERUD 1709 CENTURY SQ 1188 Bishop Honolulu, HI 96813		300.00	
8/31/06	<input type="checkbox"/> NON-MONETARY CONTRIBUTION MICHAEL E FASSIOTTO 250 OHUA AVE #2C Honolulu, HI 96815		200.00	
8/25/06	<input type="checkbox"/> NON-MONETARY CONTRIBUTION HAWAII MEDICAL P.A.C. 1360 BERETANIA STE 200 Honolulu, HI 96814		200.00	
7/31/06	<input type="checkbox"/> NON-MONETARY CONTRIBUTION ROBERT W MUSGROVE 1055 IKENA CIRCLE Honolulu HI 96821		300.00	

1. SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (This Page).....

1400.00

2. TOTAL MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (Last Page Only) (Transfer total
to the applicable Line Number of the Disclosure Report - 11(a)(ii) or 11(b)(iii)).....

2600.00

Form CC-5(A) (Rev. 5/99)

With the exception of loans and unpaid expenditures that are forgiven, non-monetary contributions must also be reported as an "Expenditure" on
Schedule B.

CHECK ONLY ONE BOX
USE SEPARATE SCHEDULE(S) FOR EACH CATEGORY BELOW

☒ INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE
COMMITTEES/POLITICAL PARTIES

☐ CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY

STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION

SCHEDULE A
MONETARY AND NON-MONETARY CONTRIBUTIONS
CANDIDATE COMMITTEE

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 3 OF 3

John Steelquist Friends of John Steelquist

DATE OF DEPOSIT OR RECEIPT OF NON-MONETARY CONTRIBUTION	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF DONOR IF A DEPENDENT MINOR, ENTER NAME OF PARENT	FOR AGGREGATES OF \$1,000 OR MORE	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
		NAME OF EMPLOYER OCCUPATION		
7/1/2006 9/8/2006	<input checked="" type="checkbox"/> NON-MONETARY CONTRIBUTION HAWAIIAN ISLANDS MEDICAL 841 POKUKAIA #8 Honolulu HI 96813		1398.00	3249.00
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
1. SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (This Page).....			1398	
2. TOTAL MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (Last Page Only) (Transfer total to the applicable Line Number of the Disclosure Report - 11(a)(ii) or 11(b)(iii)).....			3998	

Form CC-5(A) (Rev. 5/99)

With the exception of loans and unpaid expenditures that are forgiven, non-monetary contributions must also be reported as an "Expenditure" on Schedule B.

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B
EXPENDITURES
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 1 OF 6

JOHN STEELQUIST FRIENDS OF JOHN STEELQUIST

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
7/15	<input type="checkbox"/> NON-MONETARY CONTRIBUTION PATRICIA CORBALEY 1515 WARD #1104 HONOLULU, HI 96822	CAMPAIGN MANAGER	1,000.00
7/26	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Democratic PARTY 770 KAPIOLANI BLVD STE 115 HONOLULU, HI 96813	DATA BASE	500.00
7/26	<input type="checkbox"/> NON-MONETARY CONTRIBUTION SUE MILLER N/A	REIMBURSE ENVELOPES	7.91
7/28	<input type="checkbox"/> NON-MONETARY CONTRIBUTION SERVICE PRINTERS. 1829 DILLINGHAM HONOLULU, HI 96819	LETTERS	194.78
7/28	<input type="checkbox"/> NON-MONETARY CONTRIBUTION HONOLULU ADVERTISER. PO BOX 29 660 HONOLULU HI 96820	SUBSCRIPTION	96.00
7/28	<input type="checkbox"/> NON-MONETARY CONTRIBUTION JOE HARTT DESIGNS 1164 BISHOP SUITE 124 Honolulu HI 96813	BUMPER STICKERS	437.50
7/28	<input type="checkbox"/> NON-MONETARY CONTRIBUTION SERVICE PRINTERS. 1829 DILLINGHAM HONOLULU, HI 96819	BROCHURES	1655.00

1. SUBTOTAL OF EXPENDITURES THIS PERIOD (This Page).....	3891.19
2. TOTAL EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 16 of the Disclosure Report).....	

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B
EXPENDITURES
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 2 OF 6

John Steelquist Friends of John Steelquist

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
8/1	<input type="checkbox"/> NON-MONETARY CONTRIBUTION PostMASTER. United States Postal Service Honolulu, HI	Bulk MAIL	3000.00
8/3	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Service Printers 1829 Dillingham Honolulu, HI 96819	Tax on cash on ORDER	68.85
8/19	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Patricia Corbalaz. 1515 WARD #1104 Honolulu, HI 96822	Campaign Manager	1000
8/23	<input type="checkbox"/> NON-MONETARY CONTRIBUTION JOE HUNT DESIGN 1164 BISHOP #124 Honolulu HI 96813	Brochures	180
8/28	<input type="checkbox"/> NON-MONETARY CONTRIBUTION SERVICE PRINTERS 1829 Dillingham Honolulu, HI 96819	Fundraising Letter	1344.71
9/1	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Elite Catering. 4369 LAWEHANA ST Honolulu	FOOD - FUND RAISER	1191.66
9/1	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Prestige Valet PO BOX 24-0464 Honolulu, HI 96824	Parking - Fundraiser	74.88
1. SUBTOTAL OF EXPENDITURES THIS PERIOD (This Page).....			6860.01
2. TOTAL EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 16 of the Disclosure Report).....			

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B
EXPENDITURES
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 3 OF 6

John Steelquist Friends of John Steelquist

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
9/3	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>ALOHA GRAPHICS.</i>	<i>Rally Tickets</i>	<i>208.33</i>
7/4	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>City Mill DILLINGHAM Honolulu HI 96817</i>	<i>OFFICE Supply</i>	<i>17.40</i>
7/12	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>Radio Shack 1712 KING ST Honolulu HI 96826</i>	<i>TAPE RECORDER</i>	<i>58.31</i>
7/14	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>PROSIA 919 KEEAMOKU ST Honolulu HI 96814</i>	<i>T-SHIRTS.</i>	<i>617.46</i>
7/18	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>OFFICE MAX 720 ALA MOANA Honolulu HI 96814</i>	<i>OFFICE Supply</i>	<i>36.34</i>
7/25	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>WALMART KEAMOKU, Honolulu, HAWAII</i>	<i>OFFICE Supplies</i>	<i>85.64</i>
7/27	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>SERVICE PRINTERS 1829 DILLINGHAM Honolulu, HI 96819</i>	<i>BROCHURES</i>	<i>666.62</i>

1. SUBTOTAL OF EXPENDITURES THIS PERIOD (This Page).....	<i>1690.10</i>
2. TOTAL EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 16 of the Disclosure Report).....	

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B
EXPENDITURES
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 4 OF 6

John Steelquist Friends of John Steelquist

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
7/27	<input type="checkbox"/> NON-MONETARY CONTRIBUTION CLEAR CHANNEL	RADIO AD	880.15
8/10	<input type="checkbox"/> NON-MONETARY CONTRIBUTION City Mill Dunwoody Honolulu, HI	OFFICE SUPPLY	13.85
8/16	<input type="checkbox"/> NON-MONETARY CONTRIBUTION OFFICE MAX 770 ALA MOANA Honolulu, HI 96814	OFFICE SUPPLY	167.79
8/25	<input type="checkbox"/> NON-MONETARY CONTRIBUTION HAWAII IMAGING 417 COOKE Honolulu, HI 96813	BRUCHURE PRINTING	760.42
8/29	<input type="checkbox"/> NON-MONETARY CONTRIBUTION OFFICE MAX 770 ALA MOANA Honolulu, HI 96814	OFFICE SUPPLY	33.32
8/29	<input type="checkbox"/> NON-MONETARY CONTRIBUTION OFFICE MAX 770 ALA MOANA Honolulu, HI 96814	OFFICE SUPPLY	45.81
8/29	<input type="checkbox"/> NON-MONETARY CONTRIBUTION OFFICE DEPOT 340 KAMAKEE Honolulu, HI 96814	OFFICE SUPPLY	64.47

1. SUBTOTAL OF EXPENDITURES THIS PERIOD (This Page).....

1965.81

2. TOTAL EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 16 of the Disclosure Report).....

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B
EXPENDITURES
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 5 OF 6

John Steelquist Friends of John Steelquist

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
8/30	<input type="checkbox"/> NON-MONETARY CONTRIBUTION OFFICE MAX 770 ALA MOANA Honolulu, HI 96814	OFFICE SUPPLY	43.09
9/1	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Safeway Beretania Honolulu HI	OFFICE SUPPLY	25.26
9/5	<input type="checkbox"/> NON-MONETARY CONTRIBUTION SUBWAY NAAHAA Honolulu, HI	OFFICE LUNCH MEETING	25.65
9/5	<input type="checkbox"/> NON-MONETARY CONTRIBUTION OFFICE DEPOT 340 KAMAKEE Honolulu, HI 96814	OFFICE SUPPLY	43.31
9/5	<input type="checkbox"/> NON-MONETARY CONTRIBUTION OFFICE MAX 770 ALA MOANA Honolulu, HI 96814	OFFICE SUPPLY	102.04
9/7	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Special Holding Check. N/A		45.00
9/7	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Star Bulletin.	PRINT AD	537.48
1. SUBTOTAL OF EXPENDITURES THIS PERIOD (This Page).....			821.83
2. TOTAL EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 16 of the Disclosure Report).....			

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B
EXPENDITURES
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 6 OF 6

JOHN STEELQUIST Friends of John Steelquist

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
9/8	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>Special Holding Check.</i>		22.50
9/8	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>Honolulu Advertiser PO BOX 29660 Honolulu HI 96820</i>	<i>Print AD.</i>	504.59
8/2	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>BIG CITY DINER WARD CENTER Honolulu HI 96817</i>	<i>Dinner Meeting</i>	75.00
7/19	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>STOP PAYMENT FIRST HAWAIIAN BANK.</i>	<i>VOIDED CHECK</i>	38.00
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		

1. SUBTOTAL OF EXPENDITURES THIS PERIOD (This Page)..... 640.09

2. TOTAL EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 16 of the Disclosure Report)..... 15869.03

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE C
PUBLIC FUNDS AND OTHER RECEIPTS
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

John Stelquist Friends of John Stelquist

PAGE 1 OF 1

DATE OF DEPOSIT	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF SOURCE OF PUBLIC FUNDS OR OTHER RECEIPT	DESCRIPTION OF OTHER RECEIPT	AMOUNT OF PUBLIC FUNDS OR OTHER RECEIPT THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
7/31/06	First HAWAIIAN BANK MAKIKI BRANCH 1111 S BERETANIA ST HONOLULU HI 96814	Interest on SAVINGS	5.08	5.08
8/31/06	First HAWAIIAN BANK MAKIKI BRANCH 1111 S BERETANIA ST HONOLULU HI 96814	Interest on SAVINGS.	3.80	3.80
1. SUBTOTAL OF PUBLIC FUNDS AND OTHER RECEIPTS THIS PERIOD (This Page).....			8.88	
2. TOTAL PUBLIC FUNDS AND OTHER RECEIPTS THIS PERIOD (Last Page Only) (Transfer total to Line Number 13 of the Disclosure Report).....			8.88	

ATTACH A COPY OF THE
EXECUTED LOAN DOCUMENT AT
THE TIME OF INITIAL DISCLOSURE

STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION

SCHEDULE D
LOANS
CANDIDATE COMMITTEE

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 1 OF 1

John Steelquist Friends of John Steelquist

LOAN SOURCE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF LENDER	NAME OF EMPLOYER AND OCCUPATION	AMOUNT OF LOAN AT BEGINNING OF THIS PERIOD	NEW LOAN AMOUNT THIS PERIOD	AMOUNT REPAYED OR FORGIVEN THIS PERIOD	AMOUNT OF LOAN AT CLOSING OF THIS PERIOD
<input checked="" type="checkbox"/> CANDIDATE <input type="checkbox"/> IMMEDIATE FAMILY <input type="checkbox"/> FINANCIAL INSTITUTION <input type="checkbox"/> OTHER			31,250	-	<input type="checkbox"/> FORGIVEN	31,250
<input type="checkbox"/> CANDIDATE <input type="checkbox"/> IMMEDIATE FAMILY <input type="checkbox"/> FINANCIAL INSTITUTION <input type="checkbox"/> OTHER					<input type="checkbox"/> FORGIVEN	
<input type="checkbox"/> CANDIDATE <input type="checkbox"/> IMMEDIATE FAMILY <input type="checkbox"/> FINANCIAL INSTITUTION <input type="checkbox"/> OTHER					<input type="checkbox"/> FORGIVEN	
<input type="checkbox"/> CANDIDATE <input type="checkbox"/> IMMEDIATE FAMILY <input type="checkbox"/> FINANCIAL INSTITUTION <input type="checkbox"/> OTHER					<input type="checkbox"/> FORGIVEN	
<input type="checkbox"/> CANDIDATE <input type="checkbox"/> IMMEDIATE FAMILY <input type="checkbox"/> FINANCIAL INSTITUTION <input type="checkbox"/> OTHER					<input type="checkbox"/> FORGIVEN	

1. SUBTOTAL (This Page).....	0000	-0-	31250
2. TOTAL NEW LOANS THIS PERIOD (Last Page Only) (Transfer total to Line Number 14 of the Disclosure Report).....	-0-		
3. TOTAL LOANS REPAYED OR FORGIVEN THIS PERIOD (Last Page Only) (Transfer total to Line Number 17 of the Disclosure Report).....		-0-	
4. TOTAL LOANS AT THE CLOSING OF THIS PERIOD (Last Page Only) (Transfer total to Line Number 7 of the Disclosure Report)....			31250

Form CC-5(D) (Rev. 5/99)

If a loan is forgiven, the loan must also be reported as a "Non-Monetary Contribution" on Schedule A. The forgiven loan does not have to be reported as an "Expenditure" on Schedule B.

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE E
UNPAID EXPENDITURES
CANDIDATE COMMITTEE**

NOTE: EXPENDITURES ARE CONSIDERED MADE WHEN THE PRODUCT IS DELIVERED OR THE SERVICE IS RENDERED (ACCRUAL METHOD OF ACCOUNTING).

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 1 OF 1

John Steelgaust Friends of John Steelgaust

DATE OF UNPAID EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF VENDOR	AMOUNT OF UNPAID EXPENDITURE AT BEGINNING OF THIS PERIOD	NEW UNPAID EXPENDITURE AMOUNT THIS PERIOD	AMOUNT PAID OR FORGIVEN THIS PERIOD <input type="checkbox"/> FORGIVEN	AMOUNT OF UNPAID EXPENDITURE AT CLOSING OF THIS PERIOD
	PURPOSE OF UNPAID EXPENDITURE				
7/10	Unlimited Designs 2298 ALA HAO PL Unit M Honolulu HI 96819	—	1171.87	<input type="checkbox"/> FORGIVEN	1171.87
7/13	HAWAIIAN IMAGING 417 COOKE Honolulu, HI 96813	—	1140.63	<input type="checkbox"/> FORGIVEN	1140.63
				<input type="checkbox"/> FORGIVEN	
				<input type="checkbox"/> FORGIVEN	
				<input type="checkbox"/> FORGIVEN	

1. SUBTOTAL (This Page).....	2312.50		2312.50
2. TOTAL NEW UNPAID EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 20 of the Disclosure Report).....	2312.50		
3. TOTAL UNPAID EXPENDITURES PAID OR FORGIVEN THIS PERIOD (Last Page Only) (Transfer total to Line Number 18 of the Disclosure Report).....			
4. TOTAL UNPAID EXPENDITURES AT THE CLOSING OF THIS PERIOD (Last Page Only) (Transfer total to Line Number 8 of the Disclosure Report).....			2312.50

Form CC-5(E) (Rev. 5/99)

If an unpaid expenditure is forgiven, the unpaid expenditure must also be reported as a "Non-Monetary Contribution" on Schedule A. The forgiven unpaid expenditure does not have to be reported as an "Expenditure" on Schedule B.